



**State of Connecticut
Police Officer Standards and Training Council
Connecticut Police Academy**



MEDICAL APPROVAL FORM

**Physician's certification of ability to participate in the Police Officer Standards
and Training "Basic Recruit Training Program"**

This is to certify that I have reviewed the following submitted material describing various aspects of the Police Officer Standards and Training Council's "Basic Recruit Training Program."

- Entry Level Physical Fitness Standards
- Defensive Tactics Training Program
- Chemical Agents Training
- Firearms Training Program
- Physical Wellness Program
- Driver Training Program
- Water Safety Program

After reviewing said material, it is my professional opinion that the candidate named below:

Candidate's Name: _____
Candidate's Employing Agency: _____
Date of Physical Exam: _____

IS MEDICALLY CAPABLE OF PARTICIPATING IN THIS BASIC RECRUIT
TRAINING PROGRAM

Physician's Signature: _____

Physician's name (typed or imprinted with office stamp)